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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself							
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name							
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Don First name L Middle name Alberts, II Last name and Suffix (Sr., Jr., II, III)		Lisa First name R Middle name Alberts Last name and Suffix (Sr., Jr., II, III)				
2.	All other names you have used in the last 8 years Include your married or maiden names.							
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6093		xxx-xx-4211				

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Debtor 1 Don L Alberts, II
Debtor 2 Lisa R Alberts

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	11468 Meritton Ct	If Debtor 2 lives at a different address:		
N		Frankfort, IL 60423 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Will County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6. Why you are choosing this district to file for bankruptcy		Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	 Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) 		

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	btor 2 Lisa R Alberts			_	Case number (if known)			
Pai	rt 2: Tell the Court About	Your Bankruptcy Ca	ase					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a			y 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy ate box.			
	choosing to file under	Chapter 7						
		☐ Chapter 11						
		☐ Chapter 12						
		☐ Chapter 13						
8.	How you will pay the fee	 I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more deta about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or more order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check was pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay 						
		I request that but is not recapplies to yo	luired to, waive your fee, and m ur family size and you are unab	request this opti- nay do so only if y ole to pay the fee	on only if you are filing for Chapter 7. By law, a judge myour income is less than 150% of the official poverty line in installments). If you choose this option, you must fill official Form 103B) and file it with your petition.	that		
9.	Have you filed for	■ No.						
	bankruptcy within the last 8 years?	☐ Yes.						
		District		When	Case number			
		District		When	Case number			
		District		When	Case number			
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
		Debtor			Relationship to you			
		District		When	Case number, if known			
		Debtor			Relationship to you			
		District		When	Case number, if known			
11.	Do you rent your	■ No. Go to	line 12.					
	residence?	☐ Yes. Has yo	our landlord obtained an evictio	n judgment agair	nst you?			
			No. Go to line 12.					
			Yes. Fill out <i>Initial Statement</i> at this bankruptcy petition.	About an Evictior	n Judgment Against You (Form 101A) and file it as part	of		

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	otor 1 Don L Alberts, II Lisa R Alberts		Docum	Case number (if known)
Par	Report About Any Bu	sinesses	You Own as a Sole Proprie	etor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bu	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	ate & ZIP Code
	it to this petition.		Check the appropriate be	ox to describe your business:
			☐ Health Care Busine	iness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as o	defined in 11 U.S.C. § 101(53A))
			☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))
			☐ None of the abov	<i>r</i> e
13. Are you filing under Chapter 11, the court must know whether you are a small business debtor so deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most recent be appreciately compared as mall business debtor, you must attach your most recent be operations, cash-flow statement, and federal income tax return or if any of these documents do no in 11 U.S.C. 1116(1)(B).				a small business debtor, you must attach your most recent balance sheet, statement of
	debtor? For a definition of small	■ No.	I am not filing under Cha	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	· Hazardous Property or Ar	ny Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.		
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	- ,			Number, Street, City, State & Zip Code

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Debtor 1 Don L Alberts, II
Debtor 2 Lisa R Alberts Case number (if known)

Part 5: Explai

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 18-25816 Doc 1 Filed 09/13/18
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Debtor 1 Debtor 2 Lisa R Alberts

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Desc Main

Case number (if known)

Par	6: Answer These Questi	ions for R	leporting Purposes			143+			
16.	What kind of debts do you have?	16a.	individual primarily for a p	y consumer debts? Consumer debts are personal, family, or household purpose."	e defined in 11 U.S.C. § 101(8) as "incurred	by an			
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
	•	16b.		Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
		☐ No. Go to line 16c.							
			☐ Yes. Go to line 17.						
		16c.	State the type of debts yo	ou owe that are not consumer debts or bu	siness debts				
17.	Are you filing under Chapter 7?	□ Ńo.	I am not filing under Chap	oter 7. Go to line 18.		, 27 c			
	Do you estimate that after any exempt property is excluded and	Yes.		7. Do you estimate that after any exempt e available to distribute to unsecured cred	property is excluded and administrative expitors?	enses			
	administrative expenses are paid that funds will		■ No						
	be available for distribution to unsecured creditors?	<i>3</i> .	☐ Yes			,			
18.		1 -49		□ 1,000-5,000	25,001-50,000				
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	□ 50,001-100,000				
		☐ 100-1 ☐ 200-9		□ 10,001-25,000	☐ More than100,000				
19.	How much do you estimate your assets to be worth?	□ \$0 - \$	\$50,000 001 - \$100,000	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
		Y.	,001 - \$100,000 ,001 - \$500,000 ´	□ \$50,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion	- 178			
			,001 - \$1 million	□ \$100,000,001 - \$500 million	n ☐ More than \$50 billion				
20.	How much do you	□ \$0 - \$	550,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion				
			,001 - \$500,000 ,001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	J			
Par	:7: Sign Below	2F-							
For	you	I have ex	camined this petition, and I	declare under penalty of perjury that the i	information provided is true and correct.				
				er 7, I am aware that I may proceed, if eligner relief available under each chapter, and	gible, under Chapter 7, 11,12, or 13 of title 1 d I choose to proceed under Chapter 7.	1,			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.							
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 2571.							
		Don L	Alberts, II	Lisa R Albei) (Lucky)				
			e of Debtor 1	Signature of D					
		Executed	d on 09/10/19	Executed on	9/10/18				
		1.	MM / DD / YYÝY		MM/ DD /YYYY				

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Case 18-25816 Doc 1 Filed 09/13/18 Entered 09/13/18 14:49:30 Desc Main Don L Alberts, II Debtor 1 Page 7 of 52 Document Case number (if known) Debtor 2 Lisa R Alberts I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed For your attorney, if you are under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter represented by one for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the If you are not represented by an attorney, you do not need schedules filed with the petition is incorrect. to file this page. Date Signature of Attorney for Debtor Thomas M. Britt Printed name Law Offices of Thomas M. Britt, P.C. Firm name

Email address

6200940 IL

7601 W. 191st Street, Suite 1W

Tinley Park, IL 60487 Number, Street, City, State & ZIP Code

Contact phone 815-464-5533

tmblawstf1@sbcglobal.net

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form—the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

gi.

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both, 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee + \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee + \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-25816 Doc 1 Filed 09/13/18 Entered 09/13/18 14:49:30 Desc Main B2030 (Form 2030) (12/15) Document Page 12 of 52

Document Page 12 of 52 United States Bankruptcy Court Northern District of Illinois

	Don L Alberts, II			
In re	Lisa R Alberts		Case No.	
	*	Dehtor(s)	Chapter	7

	Dedion(s)	Cn	apter							
	DISCLOSURE OF COMPENSATION OF ATTORN	EY FO	R DE	BTOR(S)						
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:									
	FLAT FEE									
	For legal services, I have agreed to accept	\$		2,600.00						
	Prior to the filing of this statement I have received	\$		1,100.00						
	Balance Due	\$		1,500.00						
	□ <u>RETAINER</u>									
	For legal services, I have agreed to accept and received a retainer of	\$								
	The undersigned shall bill against the retainer at an hourly rate of [Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.	\$								
2.	The source of the compensation paid to me was:									
	■ Debtor □ Other (specify):									
3.	The source of compensation to be paid to me is:									
	■ Debtor □ Other (specify):									
4.	■ I have not agreed to share the above-disclosed compensation with any other person unle	ss they ar	e memb	ers and associates of	my law firm.					
	I have agreed to share the above-disclosed compensation with a person or persons who a copy of the agreement, together with a list of the names of the people sharing in the compensation.				w firm. A					
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of	the bankr	uptcy ca	se, including:						
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determing the debtor and filing of any petition, schedules, statement of affairs and plan which may be considered. Representation of the debtor at the meeting of creditors and confirmation hearing, and an end. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exempare reaffirmation agreements and applications as needed; preparation and provided the secured creditors on household goods. 	y be requi ny adjourn tion plan	ired; ned heari nning;	ings thereof; preparation and fi	ling of					
6.	By agreement with the debtor(s), the above-disclosed fee does not include the following services Representation of the debtors in any dischargeability actions.	vice:								
	e de la companya de La companya de la companya del companya de la companya del companya de la co									

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Don L Alberts, II In re Lisa R Alberts

Case No.

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

,
CERTIFICATION
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in
his bankruptcy proceeding.
SOD 10 2000 March
Date Thomas M. Britt
Signature of Attorney
Law Offices of Thomas M. Britt, P.C.
7601 W. 191st Street, Suite 1W
Tinley Park, IL 60487
815-464-5533 Fax: 815-464-7788
tmblawstf1@sbcglobal.net
Name of law firm

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LAW OFFICES OF THOMAS M. BRITT, P.C.



Contract For Chapter 7 Bankruptcy Services

BRITT,	reement is executed day of one or more). The parties agree as follows:	202, by and between the LAW	OFFICES OF THOMAS M. (hereinafter "Client(s)",
1.	Type of Bankruptcy		

A Comment of the

Client retains attorney to file a Chapter 7 bankruptcy. If the Client determines at a later date that the Client desires to file a chapter 13 bankruptcy, the parties shall execute a new fee contract setting forth the terms of such representation.

2. Services Provided by Attorney

Contingent upon being paid for the services as specified below, the Attorney shall provide the following legal services for the Client:

The standard fee includes preparing all the paperwork to start the case, attending the first meeting of creditors, working out "reaffirmations" with your creditors, and dealing with your creditors during the pendency of your case.

3.	Fees
----	------

The base fee for the filing of the bankruptcy is The fee is based on the following assumptions:

Client has provided attorney with complete and accurate information.

Client will pay the fee in a reasonable amount of time, but no later than 60 days from this date. b)

If either of the assumptions set out above are inaccurate, and as a result, the amount of legal service to be provided by the Attorney and/or his staff increased, the fee shall be increased accordingly to compensate the Attorney for the additional time and expense in providing the legal services.

4. Terms of Payment

a) The fees shall be paid as follows: to prepare to file at meeting of creditors

at time of discharge

Billed at \$300.00 per hour for TMB.

5. Services Provided Under the Base Fee

The following legal services are provided under the base fee:

The standard fee includes preparing all the paperwork to start the case, attending the first meeting of creditors, working out "reaffirmations" with your creditors, and dealing with your creditors during the pendency of your case.

6. Services Not Provided Under the Base Fee

There will be additional fees for any extraordinary work, such as real estate transfers, appeals, more than 20 creditors, creditor contests or defending creditor motions, amendments to your petition or schedules, or any work which is not normally a part of

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a routine consumer bankruptcy. These additional fees will be determined when the extraordinary work is required.

7. Client's Obligations

The Client's Obligations are as follows:

- a) To pay the fees as set out above.
- To provide accurately and honestly all the information necessary to prepare and file the Chapter 7 bankruptcy. b)
- To keep the Attorney advised at all times of the Client's address and telephone numbers. c)
- To attend the 341 Creditors Meeting and any other hearings set in the case, if told to be there. d)
- To provide any information requested of the Debtor by the Chapter 7 Trustee, the U.S. Trustee, or any other party in e) the case, unless the Court rules that the Client is not required to provide the information.
- f) To respond immediately to any requests of the Client by the Attorney or the Attorney's staff.

LAW OFFICES OF THOMAS M. BRITT, P.C

Attorney

	(Case 18-25816	Doc 1)9/13/18 Iment	Entered 09/13/18 Page 16 of 52	3 14:49:30	Des	c Main
=	in this inf	ormation to identify	your case and th						
Deb	otor 1	Don L Albert	s, II						
D - I	0	First Name		e Name		Last Name			
	otor 2 use, if filing)	Lisa R Albert First Name		e Name		Last Name			
Unit	ted States	Bankruptcy Court for	the: NORTHER	RN DISTR	ICT OF ILLIN	NOIS			
Cas	se number							г	☐ Check if this is an
	, o mambon					-		L	amended filing
S C n ea hink nfor	cheduch category	Be as complete and a nore space is needed, a	operty escribe items. List	le. If two m	narried people	n asset fits in more than one of are filing together, both are e e top of any additional pages,	qually responsible	for sup	olying correct
Part	1: Descri	be Each Residence, Bu	ilding, Land, or Ot	ther Real E	state You Ow	n or Have an Interest In			
. D	o you own o	or have any legal or equ	uitable interest in a	any reside	nce, building,	land, or similar property?			
	No. Go to I	Part 2.							
1.1				What is	s the property	? Check all that apply			
	11468 N	lerritton Ct			Single-family h	nome	Do not deduct sec	ured clain	ns or exemptions. Put
	Street addre	ess, if available, or other desc	cription	ш	Duplex or mult Condominium	ti-unit building or cooperative			claims on Schedule D: Secured by Property.
	Frankfo	rt IL	60423-0000	_	Manufactured Land	or mobile home	Current value of tentire property?		Current value of the portion you own?
	City	State	ZIP Code	_	Investment pro	pperty	\$380,000	0.00	\$380,000.00
					Timeshare Other as an interest	in the property? Check one		ole, tenar	ur ownership interest acy by the entireties, or
					Debtor 1 only		Tenancy By t	he Enti	rety
	Will				Debtor 2 only				
	County			_	Debtor 1 and [•			unity property
				Other i		the debtors and another ou wish to add about this item on number:	such as local	5)	
						rom Part 1, including any e			¢200 000 00
	pages you	ı have attached for F	Part 1. Write that	number	here		=>	l	\$380,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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_	Lisa R Alberts		· · · · · · · · · · · · · · · · · · ·	
Cars, van	s, trucks, tractors, sport utility v	ehicles, motorcycles		
□ No				
■ Yes				
3.1 Make:	Pontiac	Who has an interest in the property? Check one	Do not deduct secured cl	
Model:	0 "	Debtor 1 only		ed claims on Schedule D: ims Secured by Property.
Year:	2012	Debtor 2 only		
Approx	kimate mileage: 135,000	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	information:	☐ At least one of the debtors and another		, ,
		☐ Check if this is community property	\$5,000.00	\$5,000.00
		(see instructions)		
3.2 Make:	Chevy	Who has an interest in the property? Check one	Do not deduct secured cl	laims or exemptions. Put
3.∠ Make: Model:		Debtor 1 only	the amount of any secure	ed claims on Schedule D:
iviodei: Year:	2015	Debtor 1 only Debtor 2 only	Creditors who Have Clai	aims Secured by Property.
	ximate mileage: 30,000	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	information:	☐ At least one of the debtors and another	entire property:	portion you own:
Lease		At least one of the debtors and another		
		☐ Check if this is community property	\$12,000.00	\$12,000.00
Examples:		(see instructions) Ind other recreational vehicles, other vehicles, an exatercraft, fishing vessels, snowmobiles, motorcycle and exatercraft.		
Examples: ■ No		nd other recreational vehicles, other vehicles, an		
Examples: No Yes Add the o	Boats, trailers, motors, personal was a second was a seco	nd other recreational vehicles, other vehicles, an	accessories ny entries for	\$17,000.00
Examples: No Yes Add the copages your art 3: Description	Boats, trailers, motors, personal was dollar value of the portion you on the have attached for Part 2. Write tribe Your Personal and Household	and other recreational vehicles, other vehicles, an vatercraft, fishing vessels, snowmobiles, motorcycle as we for all of your entries from Part 2, including are that number here	ny entries for	
No ☐ Yes Add the copages yourt 3: Description	Boats, trailers, motors, personal was dollar value of the portion you on the have attached for Part 2. Write tribe Your Personal and Household	and other recreational vehicles, other vehicles, an attercraft, fishing vessels, snowmobiles, motorcycle as wn for all of your entries from Part 2, including are that number here	ny entries for	\$17,000.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
No ☐ Yes Add the copages yourt 3: Descopyou own Househole Examples	Boats, trailers, motors, personal was dollar value of the portion you on the have attached for Part 2. Write tribe Your Personal and Household	and other recreational vehicles, other vehicles, an extercraft, fishing vessels, snowmobiles, motorcycle as with a state of your entries from Part 2, including are that number here	ny entries for	Current value of the portion you own? Do not deduct secured
■ No □ Yes Add the copages yourt 3: Descopyou own Household Examples □ No	Boats, trailers, motors, personal was dollar value of the portion you on have attached for Part 2. Write or have any legal or equitable in digoods and furnishings:	and other recreational vehicles, other vehicles, an extercraft, fishing vessels, snowmobiles, motorcycle as with a state of your entries from Part 2, including are that number here	ny entries for	Current value of the portion you own? Do not deduct secured
No No Yes Add the copages yourt 3: Descopyou own Household Examples □ No	Boats, trailers, motors, personal was dollar value of the portion you or un have attached for Part 2. Write tribe Your Personal and Household or have any legal or equitable in d goods and furnishings and furniture, linent describe	and other recreational vehicles, other vehicles, an vatercraft, fishing vessels, snowmobiles, motorcycle and with a state of your entries from Part 2, including an exthat number here	ny entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No □ Yes Add the copages your art 3: Descopyou own Househole Examples □ No	Boats, trailers, motors, personal was dollar value of the portion you or un have attached for Part 2. Write tribe Your Personal and Household or have any legal or equitable in d goods and furnishings and furniture, linent describe	and other recreational vehicles, other vehicles, an extercraft, fishing vessels, snowmobiles, motorcycle as with a state of your entries from Part 2, including are that number here	ny entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples: No Yes Add the copages yourt 3: Descopyou own Household Examples No Yes. D Electronic Examples	Boats, trailers, motors, personal was dollar value of the portion you on the have attached for Part 2. Write or have any legal or equitable in the dollar or have any legal or equitable in the dollar appliances, furniture, linent describe	and other recreational vehicles, other vehicles, an extercraft, fishing vessels, snowmobiles, motorcycle and with a state of the following items of the following items? Set, Bedroom Set, Couches, Appliances	ny entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
Add the copages yourt 3: Description of the copages you own Household Examples In No Electronic Examples In No	Boats, trailers, motors, personal was dollar value of the portion you on the have attached for Part 2. Write a tribe Your Personal and Household is or have any legal or equitable in the dollar or have any legal or equitable in the dollar appliances, furniture, linent describe Dining Room Sets Televisions and radios; audio, views	and other recreational vehicles, other vehicles, an extercraft, fishing vessels, snowmobiles, motorcycle and with a state of the following items of the following items? Set, Bedroom Set, Couches, Appliances	ny entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples: No Yes Add the copages your own Househol Examples: No Yes. D	Boats, trailers, motors, personal was dollar value of the portion you on the have attached for Part 2. Write tribe Your Personal and Household or have any legal or equitable in digoods and furnishings: Major appliances, furniture, linent Describe Dining Room Sees: Televisions and radios; audio, vicincluding cell phones, cameras, Describe	and other recreational vehicles, other vehicles, an extercraft, fishing vessels, snowmobiles, motorcycle and with a state of the following items of the following items? Set, Bedroom Set, Couches, Appliances	ny entries for	Current value of the portion you own? Do not deduct secured claims or exemptions. \$1,500.

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

Entered 09/13/18 14:49:30 Case 18-25816 Doc 1 Filed 09/13/18 Desc Main Document Page 18 of 52 Debtor 1 Don L Alberts, II Debtor 2 Lisa R Alberts Case number (if known) ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Day to Day Work Clothes \$200.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$500.00 Wedding Rings, Necklaces 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,000.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes.....

Official Form 106A/B Schedule A/B: Property page 3

First Midwest Bank

17.1. Checking

\$1,200.00

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	ebtor 2 Lisa R Alber		Case num	ber (if known)
		17.2. Savings	First Midwest Bank	\$500.00
18.		or publicly traded stocks investment accounts with br	okerage firms, money market accounts	
	☐ Yes	Institution or issuer	name:	
19.	Non-publicly traded storage in	ock and interests in incorp	orated and unincorporated businesses, includir	ng an interest in an LLC, partnership, and
		ormation about them Name of entity:	 % of own	ership:
20.	Negotiable instruments	include personal checks, ca	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders ansfer to someone by signing or delivering them.	S.
	☐ Yes. Give specific info	ormation about them Issuer name:		
21.	Retirement or pension Examples: Interests in I No		403(b), thrift savings accounts, or other pension or բ	profit-sharing plans
	Yes. List each accoun	t separately. Type of account:	Institution name:	
		401(k)	Superior Ambulance	\$40,000.00
22.	Examples: Agreements	d deposits you have made s	o that you may continue service or use from a comp public utilities (electric, gas, water), telecommunica	
	■ No □ Yes		Institution name or individual:	
23.	Annuities (A contract fo	or a periodic payment of mon	ey to you, either for life or for a number of years)	
		suer name and description.		
24.	Interests in an education 26 U.S.C. §§ 530(b)(1), 5		qualified ABLE program, or under a qualified sta	te tuition program.
	* * *	stitution name and description	on. Separately file the records of any interests.11 U.S	S.C. § 521(c):
25.	Trusts, equitable or fut	ture interests in property (other than anything listed in line 1), and rights o	r powers exercisable for your benefit
	☐ Yes. Give specific info	ormation about them		
26.			nd other intellectual property eds from royalties and licensing agreements	
	☐ Yes. Give specific info	ormation about them		
27.		and other general intangible mits, exclusive licenses, coo	les perative association holdings, liquor licenses, profes	ssional licenses
	Yes. Give specific info	ormation about them		
M	oney or property owed t	o you?		Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 4

Case 18-25816 Doc 1 Filed 09/13/18 Entered 09/13/18 14:49:30 Desc Main Page 20 of 52 Document Don L Alberts, II Debtor 1 Debtor 2 Lisa R Alberts Case number (if known) claims or exemptions. 28. Tax refunds owed to you ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No \square Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Superior Ambulance (No Surrender Wife \$0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information..

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached

for Part 4. Write that number here.....

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

☐ Yes. Go to line 38.

\$41,700.00

Case 18-25816 Doc 1 Filed 09/13/18 Entered 09/13/18 14:49:30 Desc Main Page 21 of 52 Document Don L Alberts, II Debtor 1 Debtor 2 Lisa R Alberts Case number (if known) Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$380,000.00 Part 2: Total vehicles, line 5 \$17,000.00 Part 3: Total personal and household items, line 15 57. \$3,000.00 Part 4: Total financial assets, line 36 \$41,700.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00

\$0.00

Copy personal property total

\$61,700.00

Official Form 106A/B Schedule A/B: Property page 6

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$61,700.00

\$441,700.00

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		12(1)		
Fill in this infor	mation to identify your	case:		
Debtor 1	Don L Alberts, II			
	First Name	Middle Name	Last Name	
Debtor 2	Lisa R Alberts			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$380,000.00		\$30,000.00	735 ILCS 5/12-901
		100% of fair market value, up to any applicable statutory limit	
\$5,000.00		\$2,400.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$1,500.00		\$1,500.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$800.00		\$800.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$200.00		\$200.00	735 ILCS 5/12-1001(a)
	\$380,000.00 \$5,000.00 \$1,500.00	\$380,000.00	\$380,000.00 \$30,000.00 \$30,000.00 \$100% of fair market value, up to any applicable statutory limit \$1,500.00 \$100% of fair market value, up to any applicable statutory limit \$1,500.00 \$100% of fair market value, up to any applicable statutory limit \$1,500.00 \$100% of fair market value, up to any applicable statutory limit \$800.00 \$100% of fair market value, up to any applicable statutory limit

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Lisa R Alberts Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Wedding Rings, Necklaces 735 ILCS 5/12-1001(b) \$500.00 \$500.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit **Checking: First Midwest Bank** 735 ILCS 5/12-1001(b) \$1,200.00 \$1,200.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings: First Midwest Bank 735 ILCS 5/12-1001(b) \$500.00 \$500.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit 401(k): Superior Ambulance 735 ILCS 5/12-1006 \$40,000.00 \$40,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit **Superior Ambulance (No Surrender** 735 ILCS 5/12-1001(h)(3) \$0.00 100% Value) **Beneficiary: Wife** 100% of fair market value, up to Line from Schedule A/B: 31.1 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Don L Alberts, II

Debtor 1

Yes

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	Document F	<u>'ade 2</u>	4 01 52		
Fill in this information to identify you	ur case:				
Debtor 1 Don L Alberts,	1				
First Name		ast Name		-	
Debtor 2 Lisa R Alberts					
(Spouse if, filing) First Name	Middle Name L	ast Name			
United States Bankruptcy Court for the	: NORTHERN DISTRICT OF ILLING	OIS			
Case number (if known)				□ Chock	if this is an
(ii diomi)				_	ded filing
					.ou ming
Official Form 106D					
Schedule D: Creditors	Who Have Claims Se	-cure	d by Propert	V	12/15
Correction D. Creditors	, who have claims ex		a by 1 Topolit	<i>3</i>	12/10
Be as complete and accurate as possible. is needed, copy the Additional Page, fill it					
number (if known).					
1. Do any creditors have claims secured b	y your property?				
☐ No. Check this box and submit t	his form to the court with your other scl	nedules. `	You have nothing else t	to report on this form.	
Yes. Fill in all of the information	below.				
Part 1: List All Secured Claims					
2. List all secured claims. If a creditor has	more than one secured claim, list the credito	r canarata	Column A	Column B	Column C
for each claim. If more than one creditor has	s a particular claim, list the other creditors in		Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in alphabet	cal order according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Ally Financial	Describe the property that secures the	claim:	\$2,000.00	\$5,000.00	\$0.00
Creditor's Name	2012 Pontiac Sunfire				
DO Day 200004	As of the date you file, the claim is: Che	ck all that			
PO Box 380901 Minneapolis, MN 55438	apply.				
Number, Street, City, State & Zip Code	☐ Contingent				
Number, Street, Oity, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	■ An agreement you made (such as mor	taage or se	ecured		
☐ Debtor 2 only	car loan)	3-3-			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechal	nic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)				
community debt					
Date debt was incurred 2013	Last 4 digits of account number	816X			
2.2 GM Financial	Describe the property that secures the	claim:	\$19,337.00	\$12,000.00	\$7,337.00
Creditor's Name	2015 Chevy Terrain (Leased)				
PO Box 181145	As of the date you file, the claim is: Che	ck all that			
Arlington, TX 76096	apply. Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as mor	tgage or se	ecured		
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mecha	nic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)				

Date debt was incurred 05/16

988X

Last 4 digits of account number

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Debtor	Don L Alberts, II		ase number (if know)		
Dobtor	First Name Middle N	lame Last Name			
Deptoi	2 Lisa R Alberts First Name Middle N	lame Last Name			
	lidland Mortgage	Describe the property that secures the claim:	\$425,000.00	\$380,000.00	\$45,000.00
Cr	editor's Name	Mortgage on 11468 Merritton Ct Frankfort, IL 60423			
	O Box 268959 klahoma City, OK 73126	As of the date you file, the claim is: Check all that apply. Contingent			
	ımber, Street, City, State & Zip Code	☐ Unliquidated			
	ves the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
	or 1 only	_			
	or 2 only	 An agreement you made (such as mortgage or secu car loan) 	rea		
_	or 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	ast one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Chec	ck if this claim relates to a	Other (including a right to offset)			
Date de	bt was incurred 8/27/06	Last 4 digits of account number 5191			
2.4 M	listy Falls HOA	Describe the property that secures the claim:	\$830.00	\$380,000.00	\$830.00
	editor's Name	HOA Dues on Residence			
C	o Clavio Law Offices,				
Р		As of the date you file, the claim is: Check all that			
	0277 W Lincoln Hwy	apply.			
	rankfort, IL 60423	☐ Contingent			
Nu	umber, Street, City, State & Zip Code	Unliquidated			
Who ov	ves the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
	or 1 only	■ An agreement you made (such as mortgage or secu	d		
	or 2 only	 An agreement you made (such as mortgage or secu car loan) 	rea		
_	or 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	ast one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Chec	ck if this claim relates to a	Other (including a right to offset)			
Date de	bt was incurred	Last 4 digits of account number			
_{2.5} S	pecialized Loan		440,000,00	4000 000 00	* 40.000.00
S	ervicing	Describe the property that secures the claim:	\$40,000.00	\$380,000.00	\$40,000.00
Cr	editor's Name	Second Mortgage			
		As of the date you file, the claim is: Check all that			
-	O Box 288065	apply.			
	ittleton, CO 80163	Contingent			
	umber, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
	ves the debt? Check one.	Nature of lien. Check all that apply.			
	or 1 only	 An agreement you made (such as mortgage or secu car loan) 	red		
_	or 2 only	Car loan) ☐ Statutory lien (such as tax lien, mechanic's lien)			
	or 1 and Debtor 2 only	<u> </u>			
	ast one of the debtors and another ck if this claim relates to a	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)			
	nmunity debt	— Other (including a right to offset)			
		Lord Botton of the Control of the Co			
Date de	bt was incurred 09/27/08	Last 4 digits of account number 504X			

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Debtor 1	Don L Alberts, II			Case number (if know)
	First Name	Middle Name	Last Name	
Debtor 2	Lisa R Alberts			
	First Name	Middle Name	Last Name	
Add the	dollar value of your ent	tries in Column A on this pag	e. Write that number here:	\$487,167.00
	the last page of your fo at number here:	orm, add the dollar value total	ls from all pages.	\$487,167.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document	Page 27 of	52		
Fill in this int	ormation to identify your cas	se:				
Debtor 1	Don L Alberts, II					
200101	First Name	Middle Name	Last Name			
Debtor 2	Lisa R Alberts					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the: N	IORTHERN DISTRICT OF IL	LINOIS			
	_					
Case number					☐ Check	if this is an
(ii kilowii)					 -	led filing
					a	g
Official Fo	orm 106E/F					
Schedule	E/F: Creditors Who	Have Unsecured	Claims			12/15
Schedule G: Ex Schedule D: Cro eft. Attach the on name and case	contracts or unexpired leases that ecutory Contracts and Unexpired ecutors Who Have Claims Secured Continuation Page to this page. If number (if known).	d Leases (Official Form 106G). I d by Property. If more space is f you have no information to re	Do not include any cr needed, copy the Pa	editors with partially s rt you need, fill it out, I	ecured claims that a number the entries in	re listed in n the boxes on the
	t All of Your PRIORITY Unsec					
	ditors have priority unsecured cl	aims against you?				
□ No. Go	to Part 2.					
Yes.						
identify what possible, lis Part 1. If m	vour priority unsecured claims. If at type of claim it is. If a claim has be to the claims in alphabetical order ac ore than one creditor holds a particu- planation of each type of claim, see to	oth priority and nonpriority amoun ccording to the creditor's name. If ular claim, list the other creditors i	nts, list that claim here you have more than to in Part 3.	and show both priority a wo priority unsecured cl	nd nonpriority amoun aims, fill out the Conti	ts. As much as nuation Page of
				Total claim	Priority amount	Nonpriority amount
2.1 IRS		Last 4 digits of accou	ınt number	\$3,000.00	\$3,000.00	** • • • • • • • • • • • • • • • • • •
Priority	/ Creditor's Name					\$0.00
Dept PO B	of Treasury Sox 21126	When was the debt in	ncurred?		-	\$0.00
Dept PO B Phila	•	When was the debt in As of the date you file		all that apply	-	\$0.00
Dept PO E Phila Number	Box 21126 Idelphia, PA 19114			all that apply	-	\$0.00
Dept PO E Phila Number	Sox 21126 Idelphia, PA 19114 er Street City State Zlp Code Irred the debt? Check one.	As of the date you file		all that apply		\$0.00
Dept PO E Phila Numbe Who incu	Sox 21126 Idelphia, PA 19114 er Street City State Zlp Code Irred the debt? Check one. r 1 only	As of the date you file Contingent Unliquidated		all that apply	-	\$0.00
Pepti PO E Phila Numbo Who incu	Sox 21126 Idelphia, PA 19114 er Street City State Zlp Code Irred the debt? Check one. If 1 only If 2 only	As of the date you file Contingent Unliquidated Disputed	e, the claim is: Check	all that apply	-	\$0.00
Depti PO E Phila Numbe Who incu Debtor	Sox 21126 Idelphia, PA 19114 er Street City State Zlp Code Irred the debt? Check one. If 1 only If 2 only If 1 and Debtor 2 only	As of the date you file Contingent Unliquidated Disputed Type of PRIORITY un	e, the claim is: Check	all that apply		\$0.00
Depti PO E Phila Numbe Who incu Debtoi Debtoi At leas	Sox 21126 Idelphia, PA 19114 er Street City State Zlp Code Irred the debt? Check one. If 1 only If 2 only If 1 and Debtor 2 only Ist one of the debtors and another	As of the date you file Contingent Unliquidated Disputed Type of PRIORITY under	e, the claim is: Check secured claim: obligations	.,,		\$0.00
Depti PO E Phila Numbr Who incu Debtor Debtor At least	Box 21126 Idelphia, PA 19114 Per Street City State Zlp Code Fired the debt? Check one. In 1 only In 2 only In 1 and Debtor 2 only In 2 only In 3 only In 3 only In 4 one of the debtors and another In 5 one of the debtors and another In 6 one of the debtors and another	As of the date you file Contingent Unliquidated Disputed Type of PRIORITY under the support of t	secured claim: bligations other debts you owe th	e government		\$0.00
Depti PO E Phila Numbr Who incu Debtor Debtor At leas	Sox 21126 Idelphia, PA 19114 er Street City State Zlp Code Irred the debt? Check one. If 1 only If 2 only If 1 and Debtor 2 only Ist one of the debtors and another	As of the date you file Contingent Unliquidated Disputed Type of PRIORITY und Domestic support of Taxes and certain of Claims for death or	secured claim: bligations other debts you owe th personal injury while y	e government rou were intoxicated		\$0.00
Depti PO E Phila Numbr Who incu Debtor Debtor At least	Box 21126 Idelphia, PA 19114 Per Street City State Zlp Code Fired the debt? Check one. In 1 only In 2 only In 1 and Debtor 2 only In 2 only In 3 only In 3 only In 4 one of the debtors and another In 5 one of the debtors and another In 6 one of the debtors and another	As of the date you file Contingent Unliquidated Disputed Type of PRIORITY und Domestic support of Taxes and certain of Claims for death or	secured claim: bligations other debts you owe th personal injury while y	e government		\$0.00
Depti PO E Phila Numbe Who incu Debtor Debtor At leas Check Is the cla No Yes	Sox 21126 Idelphia, PA 19114 Per Street City State Zlp Code Fired the debt? Check one. In 1 only In 2 only In 1 and Debtor 2 only In 3 one of the debtors and another In 3 if this claim is for a community It im subject to offset?	As of the date you file Contingent Unliquidated Disputed Type of PRIORITY under the support of t	secured claim: bligations other debts you owe th personal injury while y	e government rou were intoxicated		\$0.00
Depti PO E Phila Numbe Who incu Debtor Debtor At leas Check Is the cla No Yes Part 2: Lis	Sox 21126 Idelphia, PA 19114 In Street City State Zlp Code Inred the debt? Check one. In 1 only In 2 only In 1 and Debtor 2 only In 3 one of the debtors and another It if this claim is for a community It im subject to offset? It All of Your NONPRIORITY U	As of the date you file Contingent Unliquidated Disputed Type of PRIORITY under the support of the debt Taxes and certain of Claims for death or Other. Specify Jnsecured Claims	secured claim: bligations other debts you owe th personal injury while y	e government rou were intoxicated		\$0.00
Depti PO E Phila Numbe Who incu Debtor Debtor At leas Check Is the cla No Yes Part 2: Lis	Sox 21126 Idelphia, PA 19114 Per Street City State Zlp Code Fired the debt? Check one. In 1 only In 2 only In 1 and Debtor 2 only In 3 one of the debtors and another In 3 if this claim is for a community It im subject to offset?	As of the date you file Contingent Unliquidated Disputed Type of PRIORITY under the support of the debt Taxes and certain of Claims for death or Other. Specify Jnsecured Claims	secured claim: bligations other debts you owe th personal injury while y	e government rou were intoxicated		\$0.00
Dept PO E Phila Numbe Who incu Debto Debto At leas Check Is the cla No Yes Part 2: Lis 3. Do any cree	Sox 21126 Idelphia, PA 19114 In Street City State Zlp Code Inred the debt? Check one. In 1 only In 2 only In 1 and Debtor 2 only In 3 one of the debtors and another It if this claim is for a community It im subject to offset? It All of Your NONPRIORITY U	As of the date you file Contingent Unliquidated Disputed Type of PRIORITY understic support of Claims for death or Other. Specify Unsecured Claims Ed claims against you?	secured claim: bligations other debts you owe th personal injury while y	e government rou were intoxicated		\$0.00

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

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Debtor Debtor	r 1 Don L Alberts, II r 2 Lisa R Alberts		Case number (if know)	
4.1	Adventist Hinsdale Hospital	Last 4 digits of account number	074X	\$234.00
	Nonpriority Creditor's Name c/o Merchants Credit Guide 223 W Jackson Blvd, Ste 700 Chicago, IL 60606 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim	07/14/18	
	Who incurred the debt? Check one.	As of the date you me, the dam's	o. Oneck all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans	a ciaiii.	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	01	
	Yes	Other. Specify Medical Bil	ls	
4.2	Adventist LaGrange Hospital	Last 4 digits of account number	210X	\$275.00
	Nonpriority Creditor's Name c/o Merchants Credit Guide 223 W Jackson Blvd, Ste 700 Chicago, IL 60606	When was the debt incurred?	07/12/18	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Medical Bil	ls	
4.3	Alan J Heath DDS Nonpriority Creditor's Name	Last 4 digits of account number		\$100.00
	21237 S LaGrange Rd Frankfort, IL 60423	When was the debt incurred?	07/17/18	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical Bil	ls	

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	1 Don L Alberts, II Lisa R Alberts		Case number (if know)	
4.4	Ally Financial	Last 4 digits of account number	0176	\$197.00
	Nonpriority Creditor's Name c/o MRS 1930 Olney Ave Cherry Hill, NJ 08003	When was the debt incurred?	•	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	□ Yes	Other Specify Collection		
4.5	Amita Health	Last 4 digits of account number	0573	\$750.00
	Nonpriority Creditor's Name 417 Bridge St Danville, VA 24541	When was the debt incurred?	07/17/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separate a priority aloine.		
	No	report as priority claims Debts to pension or profit-sharir		
	Yes	Other. Specify Medical Bil	,	
4.6	Busey Bank	Last 4 digits of account number	00XX	\$111,671.00
	Nonpriority Creditor's Name 502 W Windsor	When was the debt incurred?	06/28/17	
	Champaign, IL 61820 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only			
	■ Debtor 1 and Debtor 2 only			
	☐ At least one of the debtors and another	d claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharir	• • • • • • • • • • • • • • • • • • • •	
	Yes	Other. Specify Foreclosed	l Property	

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Debtor 2	Don L Alberts, II Lisa R Alberts		Case number (if know)	
	Busey Bank	Last 4 digits of account number	0321	\$0.00
	Nonpriority Creditor's Name c/o Dennis J Barton III 17500 Chesterfield Airport Rd #201 Chesterfield, MO 63005	When was the debt incurred?	·	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	Contingent		
	_	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Notice Only	/	
	DuPage Pathology Associates SC	Last 4 digits of account number	9289	\$14.00
	Nonpriority Creditor's Name 520 E 22nd St Lombard, IL 60148	When was the debt incurred?	07/17/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical Bil	ls	
	Lurie Children's	Last 4 digits of account number	8964	\$500.00
	Nonpriority Creditor's Name PO Box 4066 Carol Stream, IL 60197	When was the debt incurred?	02/12/18	
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only			
	☐ At least one of the debtors and another	d claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Medical Bil	ls	

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Debtor 1 Debtor 2	Don L Alberts, II Lisa R Alberts		Case number (if know)	
0	Lurie Children's Hospital	Last 4 digits of account number	2081	\$487.00
2	Nonpriority Creditors Name 225 E Chicago Ave Chicago, IL 60611	When was the debt incurred?	02/12/18	
ī	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
1	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
1	☐ Debtor 1 and Debtor 2 only	□ Disputed		
1	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
1	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
I	Yes	Other. Specify Medical Bil	ls	
	Lurie Children's Medical Group	Last 4 digits of account number	8372	\$225.00
(Nonpriority Creditor's Name c/o ICS Inc PO Box 1010	When was the debt incurred?	07/13/18	
	FO Box 1010 Finley Park, IL 60477			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
١	Debtor 2 only	☐ Unliquidated		
I	Debtor 1 and Debtor 2 only	☐ Disputed		
I	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt s the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical Bil	<u>ls</u>	
-	Silver Cross Hospital	Last 4 digits of account number	7064	\$251.00
I	Nonpriority Creditor's Name PO Box 739 Moline, IL 61266	When was the debt incurred?	02/09/18	
ī	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Пол		
	<u>_</u>	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim.	
	At least one of the debtors and another	Student loans	. J.	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	s the claim subject to offset?	report as priority claims	adion agreement of divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
ļ	☐ Yes	Other. Specify Medical Bil	Is	

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	1 Don L Alberts, II 2 Lisa R Alberts		Case number (if know)	
4.1	Suburban Radiologists SC	Last 4 digits of account number	1696	\$162.00
	Nonpriority Creditor's Name 1446 Momentum Place Chicago, IL 60689	When was the debt incurred?	07/17/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Medical Bil	ls	
4.1	Synchrony Home	Last 4 digits of account number	034X	\$1,007.00
	Nonpriority Creditor's Name c/o SYNCB	When was the debt incurred?	12/12	
	PO Box 985038			
	Orlando, FL 32897-5038	As of the data way file, the alaim	er Charle all that analy	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.1	Target	Last 4 digits of account number	3579	\$3,163.00
	Nonpriority Creditor's Name	_		·
	c/o TD Bank USA, NA PO Box 9500	When was the debt incurred?	04/18	
	Minneapolis, MN 55440 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Continuent		
	Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only			
	At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	·	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other, Specify Credit card	purchases	

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ebtor 1 Don L Alberts, II ebtor 2 Lisa R Alberts	Case number (if know)				
The Pediatric Faculty Foundation	Last 4 digits of account number	8564	\$211.00		
Nonpriority Creditor's Name PO Box 4051	When was the debt incurred?	04/06/17			
Carol Stream, IL 60197-4051 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
■ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
No	Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	Other. Specify Medical Bil	Is			

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 3,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 3,000.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 119,247.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 119,247.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Fill in this infor	mation to identify your	case:		
Debtor 1	Don L Alberts, II			
	First Name	Middle Name	Last Name	
Debtor 2	Lisa R Alberts			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 GM Financial
PO Box 181145
Arlington, TX 76096

State what the contract or lease is for

3 Year Car Lease on 2015 Chevy Terrain

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		Docume	ent Page 35 d	of <u>52</u>	
Fill in this	information to identify your	case:			
Dobtor 1	Dan I Albarta II				
Debtor 1	Don L Alberts, II First Name	Middle Name	Last Name		
Debtor 2	Lisa R Alberts				
(Spouse if, filin		Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
(if known)	ber				☐ Check if this is an
()					☐ Check if this is an amended filing
neeople are rill it out, a your name 1. Do No Yes 2. With Arizon		ally responsible for supple boxes on the left. Attach Answer every question you are filing a joint case, a lived in a community property, Nevada, New Mexico, Pure boxes on the left of the lived in a community property.	olying correct information the Additional Page of the Additional Pag	tion. If more space is needed to this page. On the top of a e as a codebtor. ry? (Community property state	d, copy the Additional Page, ny Additional Pages, write
in line Form	e 2 again as a codebtor only	f that person is a guaran	tor or cosigner. Make	sure you have listed the cre	n you. List the person shown ditor on Schedule D (Official dule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor Check all schedules that	to whom you owe the debt
	,, 5561, 611, 614, 614 L			Crieck all Scriedules tha	ι αργιγ.
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			<u> </u>	
	City	State	ZIP Code		
20				Oakada Dira	
3.2	Name			Schedule D, line	
				☐ Schedule E/F, line☐ Schedule G, line☐	
				Scriedule G, line	
	Number Street				
	City	State	ZIP Code		

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Fill in this informa	ation to identify your case:	
Debtor 1	Don L Alberts, II	
Debtor 2 (Spouse, if filing)	Lisa R Alberts	
United States Ba	nkruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number (If known)		Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Fo	orm 106 <u>l</u>	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	F	■ Employed	■ Employed
attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
employers.	Occupation	R/N CCT	Receptionist
Include part-time, seasonal, or self-employed work.	Employer's name	Superior Air Ground Ambulances	Body Tech
Occupation may include student or homemaker, if it applies.	Employer's address	395 W Lake St Elmhurst, IL 60126	19815 S LaGrange Rd Mokena, IL 60448
	How long employed the	here? 20 Years	3 Years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

		For Debtor 1			For Debtor 2 or non-filing spouse	
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	7,912.92	\$	958.05
3.	Estimate and list monthly overtime pay.	3.	+\$_	0.00	+\$	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$_	7,912.92	\$_	958.05

Official Form 106I Schedule I: Your Income page 1

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	otor 1 otor 2	Don L Alberts, II Lisa R Alberts	_		Cas	se number (if ki	nown) _					
					Fo	or Debtor 1				Debtor 2			
	Cop	y line 4 here	4.		\$	7,912	2.92	<u>?</u>	\$		958.05		
5.	List	all payroll deductions:											
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	1,376	6.63	3	\$		102.38	3	
	5b.	Mandatory contributions for retirement plans	5b	٥.	\$	•	0.00	_	\$		0.00		
	5c.	Voluntary contributions for retirement plans	50	С.	\$	470	0.00)	\$		0.00	<u> </u>	
	5d.	Required repayments of retirement fund loans	50	d.	\$	320	0.63	3	\$		0.00)	
	5e.	Insurance	56		\$	54	5.00)	\$_		0.00)	
	5f.	Domestic support obligations	5f		\$		0.00	_	\$_		0.00	_	
	5g.	Union dues	50	-	\$		0.00	_	\$		0.00		
	5h.	Other deductions. Specify:	_ 5r	Դ.+			0.00	_	· \$		0.00	_	
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	2,712	2.26	<u> </u>	\$		102.38	3_	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	5,200	0.66	<u> </u>	\$		855.67	7_	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total											
	01	monthly net income.	88		\$		0.00	_	\$		0.00	_	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			\$		0.00	_	\$		0.00		
		settlement, and property settlement.	80		\$		0.00	_	\$		0.00	_	
	8d.	Unemployment compensation	80		\$		0.00	_	\$ \$		0.00	_	
	8e. 8f.	Social Security Other government assistance that you regularly receive	86	₽.	Φ.		0.00	_	Φ_		0.00	_	
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f	f.	\$		0.00)	\$		0.00)	
	8g.	Pension or retirement income	_ 80	g.	\$		0.00	<u> </u>	\$		0.00)	
	8h.	Other monthly income. Specify:	_ 8h	Դ.+	\$		0.00	<u>)</u> +	\$		0.00)	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$_	(0.00)	\$		0.0	00	
10	Cald	culate monthly income. Add line 7 + line 9.	10.	¢		5,200.66	١.,	—— \$		855.67	= \$	6 (056.33
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ-		3,200.00	1 1	–		333.07	- ⁻	0,0	750.55
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule adde contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	dep							Schedule 11.			0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies								. 12.	\$	6,0	056.33
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?								Combi month		come
		Yes. Explain:											

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	in this informa	ation to identify yo	ur case:					
	otor 1	Don L Albert				Chec	ck if this is:	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DOIL AIDEL	S, II				An amended filing	
	otor 2 ouse, if filing)	Lisa R Albert	ts				A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bank	ruptcy Court for the:	NORTH	HERN DISTRICT OF ILLIN	OIS	_	MM / DD / YYYY	
	se number nown)							
0	fficial Fo	orm 106J						
		J: Your E						12/1
info	ormation. If m		eded, atta	. If two married people ar nch another sheet to this n.				
Par		ribe Your House	hold					
1.	Is this a join							
	□ No. Go to	o line 2. e s Debtor 2 live i i	n a conar	ata hausahald?				
			ii a sepai	ate nousenoid?				
	■ N		t file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Deb	tor 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	-	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			D		12	Yes
					D		15	□ No ■ Yes
					-			□ No
					S		17	Yes
								□ No
3.	Do vour exi	penses include		No	-			☐ Yes
	expenses of	of people other the dyour depender	nan _	Yes				
Est	imate your ex	a date after the b	our bankr	ly Expenses uptcy filing date unless y ry is filed. If this is a supp				
the		h assistance and		government assistance i cluded it on <i>Schedule I:</i>)			Your expe	enses
4.	The rental of	or home owners!	hip exper	nses for your residence.	nclude first mortgag	e		
		nd any rent for the				4. \$		2,713.00
	If not include	ded in line 4:						
		estate taxes				4a. \$		0.00
		erty, homeowner's maintenance, re		''s insurance upkeep expenses		4b. \$ 4c. \$		0.00
		e maintenance, re eowner's associati				4d. \$		30.00
5.				our residence, such as ho	me equity loans	5. \$		400.00

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Debtor 1 Debtor 2		Case number (if known))
	lities:	0 - 1	
6a.	•	6a. \$	300.00
6b.	, , , ,	6b. \$	50.00
6c.		6c. \$	310.00
6d.		6d. \$	0.00
	od and housekeeping supplies	7. \$	700.00
	ildcare and children's education costs	8. \$	200.00
	thing, laundry, and dry cleaning	9. \$	150.00
	sonal care products and services	10. \$	80.00
	dical and dental expenses	11. \$	100.00
	Insportation. Include gas, maintenance, bus or train fare.	12. \$	400.00
	not include car payments.	13. \$	
	tertainment, clubs, recreation, newspapers, magazines, and books	·	0.00
	aritable contributions and religious donations	14. \$	50.00
-	urance. not include insurance deducted from your pay or included in lines 4 or 20.		
	a. Life insurance	15a. \$	50.00
	o. Health insurance	15b. \$	0.00
	c. Vehicle insurance	15c. \$	135.00
	d. Other insurance. Specify:	15d. \$	0.00
	(es. Do not include taxes deducted from your pay or included in lines 4 or 20.	13α. ψ	0.00
	ecify:	16. \$	0.00
	tallment or lease payments:		
17a	a. Car payments for Vehicle 1	17a. \$	285.00
	o. Car payments for Vehicle 2	17b. \$	200.00
170	c. Other. Specify:	17c. \$	0.00
170	d. Other. Specify:	17d. \$	0.00
	ur payments of alimony, maintenance, and support that you did not repo		0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 1		
	ner payments you make to support others who do not live with you.	\$	0.00
	ecify:	19.	
	ner real property expenses not included in lines 4 or 5 of this form or on		
	a. Mortgages on other property	20a. \$	0.00
	Real estate taxes	20b. \$	0.00
	c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	Maintenance, repair, and upkeep expenses	20d. \$	0.00
	e. Homeowner's association or condominium dues	20e. \$	0.00
1. O th	ner: Specify:	21. +\$	0.00
	culate your monthly expenses		
	a. Add lines 4 through 21.	\$	6,153.00
22b	o. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106	J-2 \$	
220	c. Add line 22a and 22b. The result is your monthly expenses.	\$	6,153.00
3. Ca l	culate your monthly net income.		
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	6,056.33
	o. Copy your monthly expenses from line 22c above.	23b\$	6,153.00
	•	·	
230	c. Subtract your monthly expenses from your monthly income.		00.07
	The result is your monthly net income.	23c. \\$	-96.67
For	you expect an increase or decrease in your expenses within the year after example, do you expect to finish paying for your car loan within the year or do you expect diffication to the terms of your mortgage?		crease or decrease because of a
	No.		
	Yes Explain here:		

	Ca	ıse 18-25816 🏻 🏻 🏗	Doc 1 Filed 09/1	3/18 Entered 09/	13/18 14:49:30	Desc N	1ain
Fill	in this inforn	nation to identify your	case:		ARTHUR YEAR		
De	btor 1	Don L Alberts, II					
De	btor 2	First Name Lisa R Alberts	Middle Name	Last Name			
	ouse if, filing)	First Name	Middle Name	Last Name			
Uni	ited States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
1	se number						if this is an led filing
~~~~		rm 106Sum					
				d Certain Statistic	<del></del>		12/15
info you	rmation. Fill or original forr	out all of your schedule	es first; then complete th	are filing together, both are e information on this form. the box at the top of this p	If you are filing amend	or supplyin led schedul	g correct les after you file
		fc				Your as Value o	ssets f what you own
1.	Schedule A 1a. Copy line	./B: Property (Official Fo	orm 106A/B) om Schedule A/B			\$	380,000.0
	1b. Copy lin	e 62, Total personal prop	perty, from Schedule A/B			\$	61,700.0
	1c. Copy line	e 63, Total of all property	on Schedule A/B			\$	441,700.0
Pai	t 2: Summ	arize Your Liabilities					
		₩ ₩ ₩				Your lia	abilities you owe
2.	Schedule D: 2a. Copy the	Creditors Who Have Clar e total you listed in Colur	aims Secured by Property nn A, Amount of claim, at	(Official Form 106D) he bottom of the last page of	Part 1 of Schedule D	\$	487,167.0
3.			Unsecured Claims (Officia 1 (priority unsecured claim	Form 106E/F) s) from line 6e of Schedule E	<i>F.F.</i>	\$	3,000.0
	3b. Copy th	e total claims from Part 2	2 (nonpriority unsecured c	aims) from line 6j of Schedul	le E/F	\$	119,247.00
		o Hi			Your total liabilities	\$	609,414.00
Pai	t 3: Summ	arize Your Income and	Expenses				
4.		Your Income (Official Fo		L		\$	6,056.33
5.	Schedule J: Copy your n	Your Expenses (Official nonthly expenses from li	Form 106J) ne 22c of <i>Schedule J</i>	······································		\$	6,153.00
Pai	t 4: Answe	er These Questions for	Administrative and Stati	stical Records			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
6.	•		er Chapters 7, 11, or 13? on this part of the form. Cl	neck this box and submit this	form to the court with yo	ur other sch	edules.
7.	Yes What kind	of debt do you have?					
				lebts are those "incurred by a		a personal,	family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 Don L Alberts, II Document Page 41 of 52

Lisa R Alberts Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total o	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	3,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	3,000.00

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Fill III tills IIIIOI	mation to identify your o	ase.		
Debtor 1	Don L Alberts, II First Name	Middle Name	Last Name	
Debtor 2	Lisa R Alberts			
(Spouse if, filing)	First Name	Middle Name	Last Name	The state of the s
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS	
Case number				·
(if known)				☐ Check if this is an
	<u> </u>			amended filing
	*			
Official Forr	<u>n 106Dec</u>			
Declarat	ion About a	n Individua	al Debtor's Sched	ules 12/15
ou must file thi	s form whenever you fil	e bankruptcy schedul connection with a ba	ponsible for supplying correct info les or amended schedules. Making Inkruptcy case can result in fines u	rmation.  a false statement, concealing property, or p to \$250,000, or imprisonment for up to 20
You must file thi obtaining mone years, or both. 1	s form whenever you fil	e bankruptcy schedul connection with a ba	les or amended schedules. Making	a false statement, concealing property, or
You must file thi obtaining mone years, or both. 1	s form whenever you fil y or property by fraud in 8 U.S.C. §§ 152, 1341, 19	e bankruptcy schedul connection with a ba 519, and 3571.	les or amended schedules. Making	a false statement, concealing property, or p to \$250,000, or imprisonment for up to 20
You must file thi obtaining mone years, or both. 1	s form whenever you fil y or property by fraud in 8 U.S.C. §§ 152, 1341, 19	e bankruptcy schedul connection with a ba 519, and 3571.	les or amended schedules. Making inkruptcy case can result in fines u	a false statement, concealing property, or p to \$250,000, or imprisonment for up to 20
You must file thiobtaining moneyears, or both. 1  Sig  Did you pa	s form whenever you fil y or property by fraud in 8 U.S.C. §§ 152, 1341, 19	e bankruptcy schedul connection with a ba 519, and 3571.	les or amended schedules. Making inkruptcy case can result in fines u	a false statement, concealing property, or p to \$250,000, or imprisonment for up to 20

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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		nation to identify you				
Debt	or 1	Don L Alberts, II First Name	Middle Name	Last Name		
Debt	or 2	Lisa R Alberts				
(Spou	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT (	OF ILLINOIS		
Case	number					
(if kno	wn)				_	Check if this is an mended filing
Off	<u>icial Fo</u>	<u>rm 107</u>				
Sta	tement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16
					equally responsible for sup	
		n). Answer every ques		ans form. On the top of any	duditional pages, write you	in name and case
Part	1: Give I	Details About Your Ma	rital Status and Where You	ı Lived Before		
1. \	What is you	r current marital statu	s?			
ĺ	Married					
I	□ Not ma					
2. I	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
ı	No					
ı	_	t all of the places you l	ved in the last 3 years. Do no	ot include where you live now	<i>1</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory	
states	s and territor	ies include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	co, Texas, Washington and W	/isconsin.)
I	No					
	☐ Yes. Ma	ake sure you fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Expla	n the Sources of You	r Income			
4. I	Did vou hav	e any income from en	nployment or from operating	ng a business during this ve	ear or the two previous cale	ndar vears?
I	Fill in the tota	al amount of income yo	u received from all jobs and a	all businesses, including parte e together, list it only once ur	time activities.	
ı	□ No					
-	Yes. Fil	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
Fron	n Januarv 1	of current year until	<b>1</b> \\\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$107,000.00	N/2 mag 2 ma	\$8,500.00
		d for bankruptcy:	■ Wages, commissions, bonuses, tips	ψ101,000.00	Wages, commissions, bonuses, tips	ψο,300.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Don L Alberts, II Debtor 1 Lisa R Alberts Debtor 2 Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and Check all that apply. Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$120,000.00 \$11,000.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$140,000.00 \$11,000.00 Wages, commissions. Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income Sources of income Gross income from **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... paid still owe Midland Mortgage 06/01/18; 07/01/18; \$8,142.00 \$425,000.00 ■ Mortgage PO Box 268959 08/01/18 ☐ Car Oklahoma City, OK 73126

☐ Credit Card
☐ Loan Repayment
☐ Suppliers or vendors

□ Other

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Debtor 1 Don L Alberts, II
Debtor 2 Lisa R Alberts

Case number (if known)

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payı	ment for
	Specialized Loan Servicing PO Box 288065 Littleton, CO 80163	06/20/18; 07/20/18; 08/20/18	\$1,200.00	\$40,000.00	■ Mortgage □ Car □ Credit Card □ Loan Repar □ Suppliers o □ Other	yment
	Ally Financial PO Box 380901 Minneapolis, MN 55438	06/10/18; 07/10/18; 08/10/18	\$600.00	\$2,000.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repat ☐ Suppliers of ☐ Other	yment
7.	Within 1 year before you filed for bankrup Insiders include your relatives; any general p of which you are an officer, director, person i a business you operate as a sole proprietor. alimony.	partners; relatives of any gen n control, or owner of 20% o	neral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a general p ny managing age	partner; corporations ent, including one for
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	is payment
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co ■ No □ Yes. List all payments to an insider		ments or transfer a	any property on a	ccount of a deb	t that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include creditor	• •
Par	t 4: Identify Legal Actions, Repossession	ons, and Foreclosures				
9.	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes.  No					
9.	List all such matters, including personal injur modifications, and contract disputes.  No Yes. Fill in the details.	y cases, small claims actions	s, divorces, collectio		ctions, support o	r custody
9.	List all such matters, including personal injur modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number		s, divorces, collectio	n suits, paternity a		r custody
9.	List all such matters, including personal injur modifications, and contract disputes.  No Yes. Fill in the details.  Case title	y cases, small claims actions	s, divorces, collectio	n suits, paternity a al Circuit n St.	ctions, support o	case
	List all such matters, including personal injur modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number  Busey Bank v. Don Alberts 18 L 321	Nature of the case  Breach of Contract	Court or agency Twelfth Judicia 14 W. Jefferson Joliet, IL 60432	n suits, paternity a al Circuit n St.	Status of the  Pending On appeal Concluded	case
	List all such matters, including personal injur modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number  Busey Bank v. Don Alberts 18 L 321  Within 1 year before you filed for bankrup Check all that apply and fill in the details belo	Nature of the case  Breach of Contract	Court or agency Twelfth Judicia 14 W. Jefferson Joliet, IL 60432	n suits, paternity a al Circuit n St.	Status of the  Pending On appeal Concluded	case
	List all such matters, including personal injur modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number Busey Bank v. Don Alberts 18 L 321  Within 1 year before you filed for bankrup Check all that apply and fill in the details below.  No. Go to line 11.	Nature of the case  Breach of Contract	Court or agency Twelfth Judicia 14 W. Jefferson Joliet, IL 60432	n suits, paternity a al Circuit n St.	Status of the  Pending On appeal Concluded	case

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	otor 1 otor 2	Don L Alberts, II Lisa R Alberts		Document	Case	e number (	if known)			
	accou	n 90 days before you filed for bankr ints or refuse to make a payment be lo 'es. Fill in the details.				ancial ins	titution, set off any a	amounts from your		
	Credi	itor Name and Address	De	scribe the action	the creditor took		Date action was taken	Amount		
	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No									
	_	zes								
Part	t 5:	List Certain Gifts and Contribution	S							
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No □ Yes. Fill in the details for each gift.									
	Gifts	with a total value of more than \$60 erson	0	Describe the gif	fts		Dates you gave the gifts	Value		
	Perso Addre	on to Whom You Gave the Gift and ess:								
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  No Yes. Fill in the details for each gift or contribution.									
	more Chari	or contributions to charities that than \$600 ity's Name ess (Number, Street, City, State and ZIP Code		Describe what y	ou contributed		Dates you contributed	Value		
Part	t 6:	List Certain Losses								
		n 1 year before you filed for bankru nbling?	otcy or	since you filed fo	r bankruptcy, did you	lose anyth	ning because of the	ft, fire, other disaster		
	_	lo 'es. Fill in the details.								
	Desc	ribe the property you lost and the loss occurred	Include	the amount that ir	coverage for the loss asurance has paid. List p 33 of Schedule A/B: Pro		Date of your loss	Value of property		
Par	t 7:	List Certain Payments or Transfers								
	consu	n 1 year before you filed for bankru lited about seeking bankruptcy or perition perition p	reparii	ng a bankruptcy p	etition?			rty to anyone you		
		lo 'es. Fill in the details.								
	Perso Addre Emai	on Who Was Paid	OU	Description and transferred	I value of any property	1	Date payment or transfer was made	Amount of payment		
	Law 7601 Tinle	Offices of Thomas M. Britt, P.C W. 191st Street, Suite 1W ey Park, IL 60487 awstf1@sbcglobal.net		Attorney Fees			08/2018	\$1,100.00		

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Debtor 1 Don L Alberts, II
Debtor 2 Lisa R Alberts

Case number (if known)

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	ess transferred il or website address on Who Made the Payment, if Not You		•	e payment ransfer was le	Amount of payment	
	Access Counseling Inc. 633 W. 5th Street Los Angeles, CA 90071	Credit Counseling		08/2	21/18	\$20.00	
17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors or Do not include any payment or transfer that you list	or to make payments to			sfer any proper	ty to anyone who	
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Address	Description and value of any property transferred  Date paymer or transfer w made				Amount of payment	
	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already list.	ness or financial affairs as security (such as the	?				
	■ No □ Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and value property transferred		Describe any pr payments receive paid in exchange	ed or debts	Date transfer was made	
	Person's relationship to you			para in exonalig			
	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No □ Yes. Fill in the details.		property to a seli	f-settled trust or	similar device o	of which you are a	
	Name of trust	Description and value	e of the propert	y transferred		Date Transfer was made	
Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit Bo	oxes, and Stora	ge Units			
	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred?	were any financial acco	unts or instrume	ents held in your	name, or for yo	our benefit, closed,	
	Include checking, savings, money market, or o houses, pension funds, cooperatives, associat			deposit; shares i	n banks, credit	unions, brokerage	
	Yes. Fill in the details.						
		_	ype of account of actrument	or Date acc closed, s moved, c transferr	or	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 yea cash, or other valuables?	r before you filed for ba	inkruptcy, any s	afe deposit box o	or other deposi	tory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access Address (Number, Stree State and ZIP Code)		scribe the conter	Do you still have it?		

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Debtor 1 Don L Alberts, II
Debtor 2 Lisa R Alberts

Case number (if known)

22.	Have you stored property in a storage unit or pla	ice other than your home within 1	year before you	ı filed for bankruptcy?	?						
	■ No										
	Yes. Fill in the details.										
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the c	ontents	Do you still have it?						
Par	9: Identify Property You Hold or Control for S	Someone Else									
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.										
	■ No □ Yes. Fill in the details.										
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP	Describe the p	roperty	Value						
Par	: 10: Give Details About Environmental Informa	tion									
	he purpose of Part 10, the following definitions a										
•	Environmental law means any federal, state, or I toxic substances, wastes, or material into the air regulations controlling the cleanup of these sub	r, land, soil, surface water, ground stances, wastes, or material.	lwater, or other	medium, including sta	atutes or						
	Site means any location, facility, or property as on to own, operate, or utilize it, including disposal s	<u>•</u>	aw, whether yo	u now own, operate, o	or utilize it or used						
	Hazardous material means anything an environn hazardous material, pollutant, contaminant, or s		waste, hazardo	us substance, toxic s	ubstance,						
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of wher	they occurred.								
24.	Has any governmental unit notified you that you	may be liable or potentially liable	under or in viol	ation of an environme	ental law?						
	■ No										
	Yes. Fill in the details.										
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		ntal law, if you	Date of notice						
25.	Have you notified any governmental unit of any	release of hazardous material?									
	■ No □ Yes. Fill in the details.										
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		ntal law, if you	Date of notice						
26.	Have you been a party in any judicial or adminis	trative proceeding under any envi	ronmental law?	Include settlements a	and orders.						
	■ No □ Yes. Fill in the details.										
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the c	ase	Status of the case						
Par	11: Give Details About Your Business or Conr	nections to Any Business									
27.	Within 4 years before you filed for bankruptcy, d	id you own a business or have an	y of the followir	ng connections to any	business?						
	☐ A sole proprietor or self-employed in a tr	•	•	-							
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)								
O#:	LE 407	Financial Affaire for Individuals Filler	for Douberrater								

Debtor 2	Don L Alberts, II		Filed 09/13/18 Document	Page 49 of 5	/13/18 14:49:30 52 ase number (if known)	Desc Main
	☐ A partner in a part	nership				
	☐ An officer, directo	r, or managing ex	ecutive of a corporatio	n		
	☐ An owner of at lea	st 5% of the votin	ng or equity securities o	f a corporation		
	No. None of the abov	e applies. Go to	Part 12.			
	Yes. Check all that a	oply above and fil	I in the details below fo	r each business.		
Ad	siness Name dress _{mber,} Street, City, State and Z	ΊΡ Code)	Describe the nature of Name of accountant of			I Security number or ITIN.
					Dates business exist	ed
	hin 2 years before you itutions, creditors, or		tcy, did you give a finar	ncial statement to a	anyone about your busir	ness? Include all financial
	No Yes. Fill in the details	below.				
	me dress mber, Street, City, State and 2	IP Code)	Date Issued			
Part 12:	Sign Below	<u>}</u>				
are true with a ba 18 U.S.C	and correct. I understankruptcy case can res. §§ 152, 1341, 1519, a	and that making a sult in fines up to	nancial Affairs and any false statement, conce \$250,000, or imprisonn  Lisa R Albe Signature of	aling property, or onent for up to 20 ye	obtaining money or prop	of perjury that the answers perty by fraud in connection
****		<u> </u>		10/10		
	attach additional page	s to Your Statem	ent of Financial Affairs	for Individuals Filin	ng for Bankruptcy (Offic	ial Form 107)?
■ No □ Yes		\$ .				
Did you	pay or agree to pay so	meone who is no	t an attorney to help yo	u fill out bankrupto	cy forms?	
☐ Yes. I	Name of Person	Attach the Bankro	ıptcy Petition Preparer's i	Notice, Declaration,	and Signature (Official Fo	orm 119).

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Fill in this infor	mation to identify your ca	20.		
Debtor 1	Don L Alberts, II First Name	Middle Name	Last Name	
Debtor 2	Lisa R Alberts			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number				
(if known)				Check if this is an amended filing
Official Fo	U00	e i i'		
Stateme	nt of intentior	i tor indiv	<u>riduals Filing Under Chap</u>	TEF / 12/15
creditors hav you have leas You must file thi whiche on the	ever is earlier, unless the form	r property, or d the lease has n hin 30 days after court extends th		the creditors and lessors you list
			s needed, attach a separate sheet to this form. C	On the top of any additional pages,
write y	our name and case numl	per (if known).		
Part 1: List Y	our Creditors Who Have	Secured Claims		
information be			: Creditors Who Have Claims Secured by Prope What do you intend to do with the property the secures a debt?	
Creditor's N	Midland Mortgage		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
	1.		Retain the property and enter into a	Yes
Description of	Mortgage on 11468 Frankfort, IL 60423	Merritton Ct	Reaffirmation Agreement.	
property			☐ Retain the property and [explain]:	
securing debt	• 2 °			
	<i>A</i> ·			
Creditor's S	Specialized Loan Servi	cing	☐ Surrender the property.	□ No
name:	<b>₹</b> ₹		☐ Retain the property and redeem it.	_
Description of	Second Mortgage		Retain the property and enter into a	Yes
property	Second Montgage		Reaffirmation Agreement.	
securing debt:	· ·		☐ Retain the property and [explain]:	
	- - -			<del></del>
Part 2: List Y	our Unexpired Personal I	Property Leases		
in the information	on below. Do not list real	estate leases. Un	in Schedule G: Executory Contracts and Unexperied leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(	the lease period has not yet ended.
Describe your u	unexpired personal prope	irty leases		Will the lease be assumed?

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Debtor Debtor		•	Case number (if known)		
Lessor	's name:	GM Financial	□ No		
		en e	■ Yes		
Descri Proper		5 Year Car Lease on 2015	hevy Terrain		
Part 3:	Sign Below				
Jnder (	penalty of perju	ry, I declare that I have indicat t to an unexpired lease.	I my intention about any property of my estate that secures a debt and any personal		
x	Son	- Cellet. H	x flalls		
	on L ^V Alberts, ignature of Debto		Lisa R Alberts Signature of Debtor 2		
D	ate 9/	10/18	Date 9/10/18		

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## United States Bankruptcy Court Northern District of Illinois

In re	Don L Alberts, II Lisa R Alberts		Case No.	
		Debtor(s)	Chapter 7	
	VE	CRIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	9
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	tors is true and correct to t	he best of my
Date:	8/10/18	Don L Alberts, II		
Date:	9/10/18	Signature of Debtor  Lisa R Alberts  Signature of Debtor	<u>E</u>	

. 3